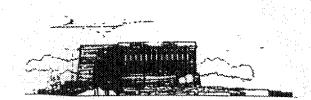
## Borough of Cliffside Park

BUILDING DEPARTMENT



DATE PAID

## Municipal Complex 525 Palisade Avenue Cliffside Park, New Jersey 07010 Tel: 201-313-2042 Fax: 201-945-3903



APPLICATION FOR CONTRACTOR LICENSE

FEDERAL ID NUMBER OR S/S NUMBER IS REQUIRED ON ALL APPLICATIONS

| #           |           |  |  |   |   |  |   |
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| TYPE        | OF WORK:  | AND SECRETARY PROPERTY OF THE PROGRAMMENT AND  |  |   |   |  | nasagan nannangung pagapan nand         |
| FEE         | \$25.00   |  |  |   |   |  |   |
|             |           |  |  | CC  | ntrol Per   | son  |   |

COPY OF INSURANCE MUST BE SUBMITTED WITH THIS APPLICATION